



Columbus Civil Service Commission
50 West Gay Street, Room 600
Columbus, Ohio 43215

Request For Citywide Transfer

This form is used to indicate your interest in being considered for other City positions assigned your current classification and employment type (full-time, part-time, limited, regular, etc.). Once your name is added to the Transfer List, it will be included with any other names forwarded to City departments for consideration when filling a vacancy for your classification and employment type. Your name will remain on the list for one (1) year from the date you submit this form to the Civil Service Commission. **Please note: It is your responsibility to notify the Civil Service Commission of any change in name, address, phone number or work status so that we may provide requesting divisions accurate information.**

Questions regarding this process may be directed to the Applicant and Employees Services Unit at (614) 645-8369.

Employee Data

Date: _____ Social Security Number: _____
Name: _____
Address: _____
City: _____ State: **Ohio** Zip Code: _____
Home Phone: _____ Work Phone: _____

Current Position Data

Present City Department/Division: _____
Present Job Classification: _____
Is your current position: ☐ Full-time or ☐ Part-time
☐ Regular or ☐ Limited
Employee Signature: _____ Date: _____

For Civil Service Commission Use Only

Department/Division: _____ Appointment/Employment Type: _____
Request Approved: ☐ Yes ☐ No Initials: _____ Date: _____